

United States Department of the Interior

NATIONAL PARK SERVICE Cape Cod National Seashore 99 Marconi Site Road Wellfleet, MA 02667

> (508) 255 - 3421 ext. 20 (508) 240 - 3291 (fax)

NEED PROGRAM APPLICATION

Name of Group:	
Contact Person:	
Address:	
Cell phone #:	
(This should be the pho	one you bring with you during your program for emergency purposes)
Phone Number(s):	WorkHome
Fax Number:	
Email address:	,
Approximate number	er of individuals in the group including chaperones:
Age/or grade of ind	ividuals:

Liability Insurance Requirement: In order for groups to participate in the Program and use the Coast Guard NEED Building, they are required to carry and show proof of liability insurance; a minimum of one million dollars (\$1,000,000) per person for any single claim and an aggregate minimum of three million dollars (\$3,000,000) for any number claims arising from any one incident. *(continued)*

The policy shall named the United Satates as an additional insured, shall specify that the insured shall have no right of subrogation against the United States for payments of any premiums or deductibles due thereunder, and shall specify that the insurance shall be assumed by, be for the account of, and be at the insured's sole risk. Groups must submit a certificate of insurance, outlining the above levels of coverage, at the time that payment is made. If you have any questionss about insurance requirements, contact Charlie Ehl at (508) 255 - 3421 ext.20, prior to applying to the program.

Please list at least three optional dates for proposed participation in order of preference. Fees are determined on a nightly rate. Remember the NEED Program is a year-round facility. The more optional dates your group can propose, the more opportunity there will be to schedule your group.

1. Arrive after 2 PM on:	Depart before Noon on:	
2. Arrive after 2 PM on:	Depart before Noon on:	
3. Arrive after 2 PM on:	Depart before Noon on:	

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Academic Institution	\cap			
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Please check all that apply:

Cape Cod OrganizationDisabled Group

___ Inner City Group

___ Non-profit Organization

- * Please include a written proposal with your application; your application will be incomplete without your proposal. On your organization's letterhead, let us know how your participation in the NEED Program will help your group research, teach, or gain knowledge and understanding of the natural or cultural resources at Cape Cod National Seashore. Your proposal should:
- 1. Reference the curriculum your organization will study or list the objectives (science or cultural history based) your organization will achieve by participating in the NEED Program.
- 2. List activities that will incorporate Cape Cod National Seashore resources into the learning of your curriculum or organizational objectives.
- 3. List three or more pre-site and post-site activities your group has planned to complement your curriculum or learning objectives at the Cape Cod National Seashore.
- 4. Detail the background or experience that your staff or outside speakers have in presenting natural or cultural resource topics.
- 5. Describe how you plan to evaluate the success of your program.